

MEMO FROM
J. LEDERBERG
GENETICS DEPARTMENT
STANFORD UNIVERSITY
STANFORD, CALIFORNIA

TO: *RO* Dr. Scott

TX
RC
RO

JUN 30 1970 ✓

I hardly need to be persuaded about the merits of the case you present. It is obviously the most favorable situation for the detection of heterozygous carriers; I have been hearing about this from Jim Neel for over 20 years.

Exactly what best to do (besides, ~~obvious~~ *clearly* more therapeutic research) is less obvious. Should we promote prenatal diagnosis and preemptive abortion of homozygotes? Should we press (a particularly racist!!) discouragement of matings of heterozygotes? How effective will non-intrusive counseling be?

There is another dimension that has been rather overlooked -- the full burden of the Hb^S in heterozygotes. Do you know of any ^{general} studies comparing the/reproductive or somatic performance of MM A/A vs A/S siblings from the same family? (I note a few examples of vulnerability to hypoxic stress appear from time to time.)

Anyhow, I strongly agree about the importance that must be attached to this problem in any overall perspective on genetic disease; your prodding is all the more welcome for being in full accord with my long-held views.

Sincerely,

ROBT. SCOTT

Enc: Sam 143